***HAPPY HOUR STUDENT SHOWCASE – Proposal for EDG 4410 Option 2 Final Project***

**Saturday, January 26, 2013, 8:30 a.m. – 4:00 p.m.**

**UCF Teaching Academy, College of Education**

**YOU ARE TO TYPE YOUR INPUT INTO THIS PROPOSAL AND SUBMIT YOUR TYPED PROPOSAL ON THE DAY YOU WILL BE PRESENTING.**

PRESENTATION PROPOSAL FORM

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| PRESENTER INFORMATION (Presenter submitting proposal will be the contact person for the presentation.) prepresentation.)group.) | | | | | |
| Name: | | | | | |
| Cell Phone: | | | Email Address: | | |
| Mailing Address: | | | | | |
|  | | | | | |
| Time needed for presentation: 🞏 30 minutes 🞏 45 minutes | | | | | |
| If additional time slots are available, would you be interested in presenting more than once? 🞏 Yes 🞏 No | | | | | |
| Names and addresses (email and snail mail addresses) of co-presenters (If applicable) | | | | | |
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| PRESENTATION INFORMATION | | | | | |
| Title of Presentation: | | | | | |
| Use the space below to briefly describe your presentation. This description will appear in the HAPPY Hour Student Showcase program. It will serve to advertise your presentation, so it must accurately reflect the content of your presentation. Please limit your description to 75 words or less. (Please refer to sample descriptions contained within this Showcase Guidelines handout and to descriptions in the programs of past Showcases. Showcase programs can be found on the HAPPY Hour website.) Please proof your description before submitting proposal. | | | | | |
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| Intended Audience(s): 🞏 Early Childhood 🞏 Elementary 🞏 Secondary 🞏 K-12 🞏 Exceptional Ed | | | | | |
|  | | | | | |
| Room Needs: 🞏 Computer Lab 🞏 Theatre-style 🞏 Tables and chairs for group work | | | | | |
|  | | | | | |
| Equipment Needed: | 🞏 Overhead Projector | 🞏 Chart & Markers | | 🞏 CD/DVD Player | 🞏 ActivBoard (smart board) |
| **🞏 Internet Access 🞏 Computer and Projector 🞏 Document Camera 🞏 Magnetic Board 🞏 None** | | | | | |
|  | | | | | |
| **Is there a possibility that you might use a video clip? 🞏 Yes 🞏 No** | | | | | |
|  | | | | | |

**Please check any applicable boxes below so that we may better assist you:**

**Faculty Mentor (Optional):**

**🞏 I would like to have a faculty mentor for guidance.**

**🞏 My preference is: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Faculty Feedback (Optional):**

**🞏 I would like to have a faculty member observe my presentation and provide me with feedback.**

**🞏 My preference is: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(We will try our best to accommodate you.)**